## Best Available Copy

## PATENT APPLICATION WEE DETERMINATION RECORD Effective October 1, 2000

ication or Docket Number

Ellective October 1, 2000										00		
		CLAIMS A	(Column 1)		(Column 2)			MALL E	ENTITY		OTHER SMALL	
T	OTAL CLAIMS						Г	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		8/	ASIC FEI	E	OR	BASIC FEE	690
TOTAL CHARGEABLE CLAIMS			∂∫minus 20=		. 3			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS				2 minus 3 =   *				X40=		OR	X80=	
ML	JLTIPLE DEPEN	RESENT				+135=						
* If the difference in column 1 is less than zero				ro, ente	"0" in (	column 2	ᆫ	TOTAL		OR OR	+270= TOTAL	
	C	I AIMS AS A	MENDED	•	IOIAL		On		711411			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (C						(Column 3)	S	SMALL	ENTITY	OR	OTHER SMALL E	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	,	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	. 38	Minus	2	5	= /3	,	X\$ 9=	117	OR	X\$18=	
	Independent	. 4	Minus	***	3	= /		X40=	4200		X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	7.40=	96	OR	7002	
							1 +	-135=		OR	+270=	
				ADI	TOTAL DIT. FEE	159 h	OR	TOTAL ADDIT, FEE	į.			
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 34	Minus	**	34	=	,	X\$-9=		OR	X\$18=	
	Independent FIRST PRESE	NTATION OF MU	Minus	ENDENT	CLAIM			X40=	D gal 60	OR	X80=	
<b></b>	I						<b>'</b>	+135=		OR	+270=	
							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	ž	(Colu		(Column 3)						
AMENDMENT C	n See	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR :	X\$18=	
	Independent	•	Minus	***		=		X40=			X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<del></del>		OR	X00-	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

B <b>est</b> TO:	Available Cop PCT OFFICE OF FINANCE CRYSTAL PLAZA 2 - 5TH F		<u>09/220134</u> PB								
FROM: PCT INTERNATIONAL DIVISION - DOZEO  CRYSTAL PLAZA 2 - 8TH FLOOR											
PLEASE P	ROCESS THE FOLLOW	ING CORRI	ECTIONS:								
F	ROM .	то									
CODE 956 966	690 90	257 267 	345 45								
· · · · · · · · · · · · · · · · · · ·	CHARGE VOUCHER IS ATTACHED ADDITIONAL FEES OTHER:										
тне о	RIGINAL METHOD OF	PAYMENT '	WAS:								

BY A CHECK

BY A CHARGE TO DEPOSIT ACCOUNT NO. 13-3402